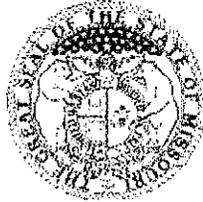


Exhibit A

Office of State Courts Administrator



Collector Guideline Acceptance Form OSCA 11-029-09

I verify I have read and will abide by the Missouri Collector Guidelines. I further understand failure to follow these guidelines may result in the termination of my contract with the Office of State Courts Administrator and the court.

- I am a commissioned law enforcement officer by the state of Missouri.*
 - I understand that I will provide a copy of my POST certification to verify my law enforcement commission in the state of Missouri.*

I am not a commissioned officer.

I have provided a completed background check, and

I have registered with the Family Care Safety Registry (FCSR), and I have provided a copy of the results of the FCSR background screening results

<u>Anna E. Minor</u>	<u>[Signature]</u>	<u>5-31-16</u>
Collector Printed name	Signature	Date

The treatment court approves this person as a collector for our circuit. This approval does not mean the judiciary shall be liable for their actions in performance of these duties.

<u>[Signature]</u>	<u>22nd</u>	<u>8-25-16</u>
Drug Court Judge/Coordinator	Circuit	Date